Fill in this information to identify your case:	
Debtor 1 Melvin Chappell, Jr.	
Debtor 2 Charlene D. Grace-Chappell (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF PENI	NSYLVANIA
Case number 16-17021-mdc	Check if this is:
(If known)	An amended filing
	A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I	MM / DD/ YYYY

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed If you have more than one job, Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Truck Driver General Clerk - Lobby Include part-time, seasonal, or Employer's name JDM Materials Co. Temple University Hospital self-employed work. **Employer's address** 2450 W Hunting Park Avenue Occupation may include student 851 County Line Road c/o TUHS Legal or homemaker, if it applies. Huntingdon Valley, PA 19006 Philadelphia, PA 19129 How long employed there? 3 years 16 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,551.03 4,640.13 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 498.51 161.16 Calculate gross Income. Add line 2 + line 3. \$ 5,138.64 2,712.19

Schedule I: Your Income Official Form 106I page 1

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	tor 1 tor 2	Melvin Chappell, Jr. Charlene D. Grace-Chappell	_	Case	number (<i>if known</i>)	16-170)21-mdc		
	•			For	Debtor 1	non-fi	ebtor 2 or iling spous		
	Cop	by line 4 here	4.	\$_	5,138.64	\$	2,712.	19	
5.	List	t all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Disability insurance	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$	1,348.40 0.00 102.79 0.00 0.00 0.00 0.00 7.11	\$ \$ \$ + \$	51. 0. 346.	00 00 00 62 00 69	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,458.30	\$	1,039.	34_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,680.34	\$	1,672.	85_	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental)	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$	0. 0. 579.	00 00 00 00 92 00	
		Nutrition Assistance Program) or housing subsidies.	8f.	\$	0.00	\$	0	00	
	8g.	Specify: Pension or retirement income	— 8g.	-\$-	0.00	- \$ 		00 00	
	8h.	Other monthly income. Specify:	8h.+	\$_		+ \$		00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	579	0.92	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$;	3,680.34 + \$_	2,25	2.77 = \$	5,9	933.11
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exity:	ur depen		•		chedule J.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rate that amount on the Summary of Schedules and Statistical Summary of Ceralies					12. \$_	5,9	933.11
13. Do you expect an increase or decrease within the year after you file this form?							Combined monthly income		
		No. Yes Explain:							

Official Form 106I Schedule I: Your Income page 2

Fill in this inform	mation to identify your	case:		
Debtor 1	Melvin Chappell, Ji First Name	Middle Name	Last Name	
Debtor 2 Charlene D. Grace-Chappell (Spouse if, filing) First Name Middle Name Last Name				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF PENNSYLVANIA	
Case number(if known)	16-17021-mdc			
,				

 Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
■ No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and
that they are true and correct. x Mewn chapell M-	x Charlere Grace Grappell
Melvin Chappell, Jr. Signature of Debtor 1	Charlene D. Grace-Chappell Signature of Debtor 2
Date April 17, 2018	Date April 17, 2018